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**PARENTING ATTITUDES OF
EXPECTANT COUPLES ASSOCIATED WITH THE AIR FORCE**

by

Deborah L. Echanis

**A Thesis Presented in Partial Fulfillment
of the Requirements for the Degree
Master of Science**

ARIZONA STATE UNIVERSITY

May 1992

PARENTING ATTITUDES OF
EXPECTANT COUPLES ASSOCIATED WITH THE AIR FORCE

by

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ABSTRACT

The purpose of this study was to examine the parenting attitudes of first time expectant parents who were associated with the Air Force. Parenting attitudes were assessed for degree of risk for parenting problems.

A review of the literature revealed that chronic socio-demographic stress, social isolation, and frequent moves are risk factors associated with child abuse. These factors are also associated with Air Force life. These inherent risk factors when coupled with negative or abusive parenting attitudes could lead to child abuse. Little attention has been given to parenting attitudes in the Air Force population.

Data were collected from a convenience sample of 67 participants in either the new OB orientation classes or the prepared child birth classes at two Air Force bases in the southwest. The instrument was the Adult-Adolescent Parenting Inventory (AAPI). The four constructs of the inventory, parental expectations, empathy, corporal punishment, and parent-child roles, examine four areas of parenting in which an inappropriate understanding can lead to parenting problems.

Data analysis was done by comparison of mean and standard deviation scores, as well as by the use of standard (sten) scores. Sten score analysis showed sample females to be at risk for problems involving parental expectations and the use of corporal punishment. Sample males appear to be at risk for problems involving child development, empathetic concern, and the use of corporal punishment.

ACKNOWLEDGMENTS

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CHAPTER 1

Introduction

Nurses are frequently in a position to detect abuse through their client-nurse interactions. The statistical findings on child abuse indicate its importance to nursing. Non-investigatory agencies (hospitals, schools, social services and mental health) are the primary source for recognition of child abuse and neglect. Such agencies recognized and reported more than twice as many abuse/neglect cases than did investigatory agencies (sheriff and police). In 1988, police and sheriffs reported an estimated 976,700 cases (United States Department of Health and Human Services [USDHHS], 1988a). Between 1980 and 1986, demonstrable harm from abuse increased 58%, harm from neglect increased 81%, and death from abuse and neglect increased 10 percent (Upsall, 1990). Some nurses, by virtue of their work situation, are in a position to assess parenting attitudes; to detect those destructive attitudes that can lead to abuse. Methods of screening for abuse potential have been postulated based on identified risk factors (Ayoub, Jacewitz, Gold, & Milner, 1983; Bavolek, 1989).

There are some observable, or measurable, phenomena frequently associated with child maltreatment that are regarded by a consensus of researchers as risk factors. The National Center on Child Abuse and Neglect Research Symposium (USDHHS, 1988b) agreed on the following risk factors: a history of being abused as a child, lack of prenatal care, disappointment with characteristics of child, teen pregnancy, chronic demographic stress, parent-child role reversal, lack of empathetic concern, parental value of physical punishment, unrealistic

~~demographic stress, parent-child role reversal, lack of empathetic concern,~~
~~parental value of physical punishment, unrealistic expectations of children,~~ social isolation, lack of employment, and frequent moves. Other factors include: low birth weight infant (Benedict & White, 1985), smoking during pregnancy (Pascoe, 1985), maternal depression (Zaravin, 1988), and lack of childhood immunizations (Pascoe, 1980).

People associated with the military have some of these risk factors.

Werisch (1991) gives the following description of a military (warrior) society:

Warrior society is characterized by a rigid authoritarian structure, frequently mirrored inside its families; extreme mobility; a great deal of father absence; isolation and alienation from the civilian community; an exceedingly strict class system;...; a deeply felt sense of mission; and not least, an atmosphere of constant preparation for war, with the accompanying implications for every family that on a moment's notice the father can be sent to war, perhaps never to be seen again. (p. xiii)

Additionally, military pay lags behind the pay of civilian counterparts and can cause chronic demographic stress, especially in the lower ranks (Judge Baker's Children's Center, 1988).

Statement of the Purpose

The purpose of this study was to examine the parenting attitudes of expectant military couples as measured by the Adult-Adolescent Parenting Inventory (AAPI) (Bavolek, 1984).

Research Questions

1. What are the parenting attitudes of women expecting their first child?
2. What are the parenting attitudes of men expecting their first child?
3. How do the parenting attitudes of women expecting their first child differ from the parenting attitudes of men expecting their first child?

Operational Definitions

Attitude - the psychological tendency to respond in a consistent way to social objects or situations as measured by the AAPI.

Abusive parenting attitudes - beliefs, as measured by the AAPI, indicative of negative parenting; associated with child abuse and neglect. Included are: inappropriate expectations of the child, lack of empathetic concern for the needs of the child, parent child role reversal, and parental value of physical punishment.

CHAPTER 2

Review of the Literature

The focus of this review is on the dynamics of child abuse, current child abuse interventions, the demographic characteristics of the Air Force, and the theoretical framework for this study.

The Dynamics of Child Abuse/Neglect

Child abuse/neglect is the result of several interacting problems which involve both adult and child. Environment, psychological makeup and attitudes of the perpetrator, and temperament of the abused or neglected child all interact to cause or compound the problem of abuse (Millor, 1981).

Antecedents

Chronic sociodemographic stress is the term used by Zaravin (1988) to describe the effects of the environmental conditions prevalent in poorer families today. Families are affected adversely by: unemployment, single parenthood, poverty, lack of education, lack of and poor use of social support networks, and having an unmanageable number of children. Most of these conditions are inextricably connected to parent attitudes and feelings.

Parent Factors

Parental characteristics or problems are sometimes associated with child abuse/neglect. Zaravin (1988) found strong correlations between maternal age at first birth, mother's educational achievement and child neglect, as well as between maternal age at first birth, her total number of live births and child abuse. Jones (1987) found maternal employment to have a very strong negative correlation

with child maltreatment. Stress was the most frequently assessed caretaker problem among whites and Hispanics (Hampton, 1987). Hampton also found income and physical neglect to be inversely related. The abusing parents in his study consistently, regardless of race, identified stress and lack of child rearing skills as the two biggest problems affecting the level of abuse.

A history of having been abused/neglected as a child is strongly correlated with parenting problems (Ayoub et al., 1983; Jackson, 1989; Koestner, Franz, & Inberger, 1990). Lack of age appropriate expectations is also frequently cited as a cause for abuse (Ayoub et al., 1983; Beavers, 1986; Neergaard, 1990).

Child Factors

It is theorized that characteristics of abused children sometimes are, in part, associated with the abuse/neglect they suffer. Benedict and White (1985) found an increase of child abuse with decreased gestational age and birth weight of infant. Females experience more abuse than males, and are more likely to be injured or impaired (USDHHS, 1988a). The report also indicated that fatal and moderate injuries are inversely related to child age, whereas incidence of abuse, emotional neglect and educational neglect are directly related to age. No relationship between race and maltreatment has been identified. Children with a difficult temperament are also at greater risk for abuse (Sherrod, Altemeier, O'Conner, & Vietze, 1984).

Consequences

The long term consequences of child abuse and neglect are devastating to the victim and to society as a whole. The cost that society pays for child abuse and neglect is high. This cost includes the loss of a productive adult citizen, the financial burden of social work, foster care, adult incarceration, and through the emotional and physical damage to society that those children cause as a result of their maladaptation. Straus and Gelles (1987) found that:

the child victims of severe violence had two to three times higher rates of trouble making friends, temper tantrums, failing grades in school, disciplinary problems at home and at school, physically assaultive behavior at home and outside the home, vandalism and theft, and drinking and drug use....Abused children are arrested four times more often than other children. (p. 640)

Straus and Gelles' findings indicated that all socioeconomic levels of society were affected. According to the Committee for Economic Development, high school dropouts cost the nation more than \$240 billion a year in lost earnings and foregone taxes, and this does not include the billions of dollars this group will undoubtedly cost the taxpayer for crime control, welfare, and other social services (Hewlett, 1991, p. 24).

Adult incarceration and mental illness are frequent by-products of being abused as a child (Hewlett, 1991; Straus & Gelles, 1987), and, therefore, are part of the human cost that society pays for abused and neglected children. Since abused children frequently use their abusing parents for role models, society also

abused children frequently use their abusing parents for role models, society also pays when the cycle is repeated, and the abused child becomes the abusing adult (Hewlett, 1991; Straus & Gelles, 1987).

Abusing parents do not make up a subset of second class citizens.

According to Bavolek:

what separates parents classified as abusive from parents classified as nonabusive is a matter of degree and frequency of inappropriate parenting Given the opportunity, the vast majority of families would like to have healthy parent-child relationships. Dysfunctional parenting and interactions are learned, and can be replaced by healthy, nurturing parent child interactions (1984, p. 20).

Current Interventions

The strategies currently being employed to fight child abuse are, for the most part, treatment interventions used after the detection of abuse or neglect. Consequently, these interventions are costly and frequently long term. During 1987, San Diego County, with a population of 2.2 million people, placed 150 children (new cases) per month in foster homes. The cost to the county was \$746 per child per month (Darmstadt, 1989). In addition to the enormous financial costs, the lack of sufficient foster homes for so many children is a problem.

Bavolek (1989) found that foster parents' parenting attitudes

were significantly more abusive than those of a normative population....No significant differences were found between abusive parents and foster

parents in their inappropriate expectations of children and in the utilization of physical punishment as a means of discipline. (p. 109)

Thus, foster care is an expensive, yet sub-optimal response to the problem.

Many of the abused children in the nation are falling through the governments' safety net of social programs due to the tremendous costs associated with those programs. The Child Protective Services (CPS) investigation and the short term treatment in abuse and neglect cases is estimated to cost \$2,000 per case; 2.4 million reports were filed in 1989 alone (National Committee for the Prevention of Child Abuse, 1990).

"Although there has been an increase in the likelihood that abused and neglected children will be recognized, these children are not reliably more likely to appear among the screened in reports to CPS" (U.S. Department of Health and Human Services, 1988, p.7).

In an effort to control costs, cases are screened for investigation. Although most legitimate cases are followed, some valid cases are lost in the screening process. The 2.4 million annual reports of suspected abuse indicate an enormous need for changes in parent support and education.

Identifying and fostering, by providing close social support as well as a role model to new parents at high risk for abuse has been the most successful at preventing abuse/neglect (Darmstadt, 1989; Neergaard, 1990; Upsall, 1990). Such programs are being developed throughout the United States because of their success and cost efficiency. Foster grandmothers, peer support, and nursing

support are a few such programs. Child crisis centers, funded by private donations, have been extremely successful at providing a safe haven for parents to leave their children during periods of stress (Arizona Republic, 1988). Such centers also offer parenting classes to their clients. However, these programs cannot provide fostering to all new parents and therefore screening and intervention for potential parenting problems is essential.

Characteristics of the U.S. Air Force

According to the 1991 USAF Almanac there are 530 thousand active duty U. S. Air Force (USAF) personnel (see Table 1), and 65% of those personnel are married. Extrapolation from a USAF Fact Sheet (1988) indicates that married USAF families have approximately 2.9 members. The Air Force is a relatively young population; 48% of the enlisted personnel are below 25 years of age. Additionally, the Air Force is a well educated population.

Theoretical Framework

The conceptual framework of Roy's adaptation model (1970; 1971; Roy & Andrews, 1991) provided the basis for this study. Roy views a person as "an adaptive system, a whole comprised of parts that function as unity for some purpose" (Roy & Andrews, 1991, p. 4). In interacting with one's social environment, one must learn to cope with change. In trying to adapt to change, a person uses both innate and acquired mechanisms. There are four modes of adaptation:

1. Physiological
2. Self Concept

Table 1

USAF Demographic Information

Total	Officers 100,045	Enlisted 430,818	Total 530,863
Education	%	%	%
High School	100	99.96	
Some College	100	71.7	
Associates	100	21.6	
Bachelors	99.97	3.6	
Masters	47.86	.4	
PhD	1.66	?	
Ethnicity/Gender			
White Males	79.5*	64.2*	
Blacks	5.6	17.7	15.4
Other	2.6	4.2	3.9
Females	13.3	13.9	13.8
Miscellaneous			
Average Age	34.6 yrs	28.0 yrs	
% oversea	18	30	
Max Pay	\$8,442.00/mo.	\$2,911.00/mo.	
Min Pay	\$1,444.00/mo.	\$697.20/mo.	

Note: *Actual percentage may be slightly higher.

Compiled from The 1991 USAF Almanac, Air Force Magazine, May 1991.

3. Role Mastery

4. Interdependence

When changes occur in life, they may threaten any one or more of these modes of adaptation. The nurse can encourage adaptation by changing a person's response potential (Roy, 1971). The goal of nursing then, according to Roy, is the promotion of adaptation in each of the four modes, thereby contributing to the person's health, quality of life, and dying with dignity (Roy & Andrews, 1991, p. 4).

In order to accomplish the goal of bringing about adaptation the nurse must have a clear understanding of:

1. The change taking place
2. The modes of adaptation threatened (for the client)
3. The client's adaptive level (the ability to respond)

This information is gathered through an appropriate assessment.

Early in the development of her model, Roy (1970) differentiated adaptation problems along a health-illness continuum as simple to complex. Hence, there were simple health problems, complex health problems, simple illness problems, and complex illness problems. One example of a complex health problem given by Roy (1970) was the adaptation to the birth of a child in the family.

Intervention involves changing the person's response potential by bringing the stimuli within the zone where a positive response is possible. The

nurse does this by changing the provoking stimuli, the contextual stimuli, or the residual stimuli. (p. 43)

When integrating the possible interventions above with the complex health problem of the impending birth of a baby, the options are considered. The nurse would not want to change the provoking stimuli (the pregnancy). Intervening to change the contextual or residual stimuli assumes knowledge of the client's present contextual or residual base stimuli. Assessment is clearly indicated in order to identify those base stimuli related to parenting. Accordingly, this study is related to Roy's assessment of stimuli and the resulting nursing diagnosis as shown in Figure 1.

In updating the model, Roy and Andrews (1991) describe the maternal role. During pregnancy, the role transition from non-mother to mother begins. For effective role transition to take place prospective mothers must create a mental image of themselves as a mother. Her description applies equally well to the paternal role. Some of the things considered and integrated into this image include: societal expectations, their own parental role models, their knowledge of child development, their knowledge of instrumental behaviors (physical caregiving) and of expressive behaviors (cuddling, interacting) that will be needed to fully care for their new baby.

During pregnancy parents-to-be begin to talk about the fetus as a person and to fantasize about the parent role to be undertaken. As the pregnancy

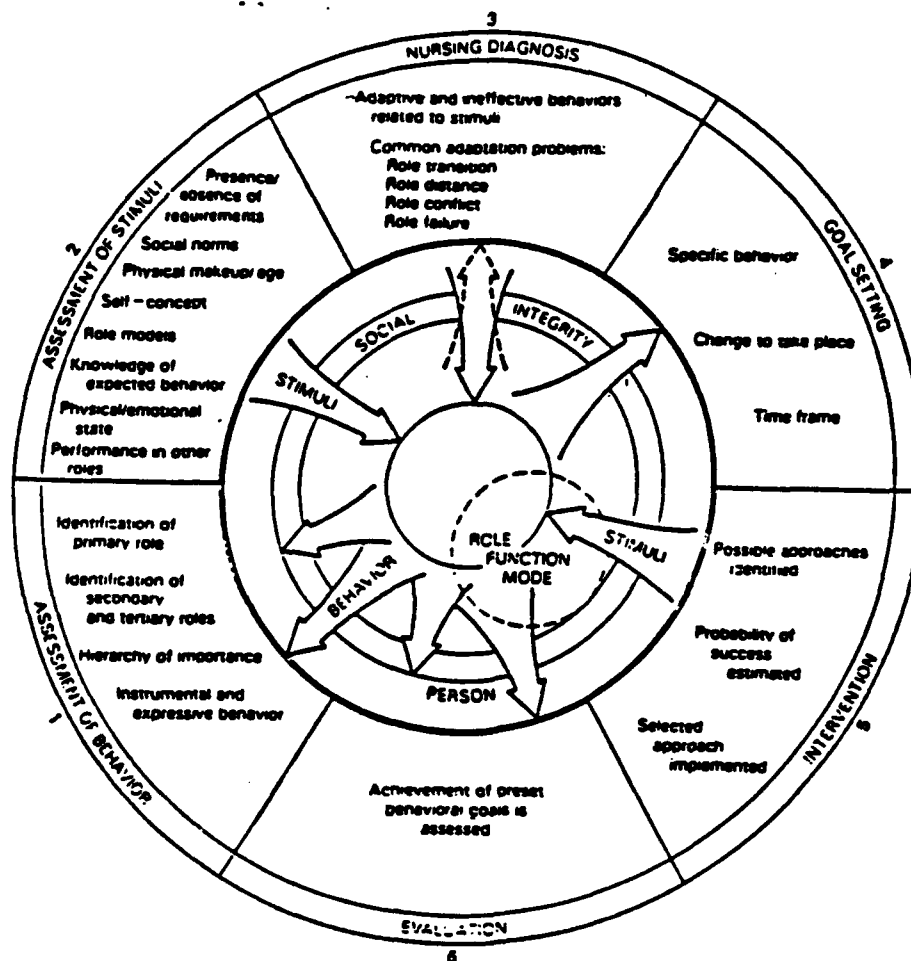


Figure 1. The nursing process as applied to role function mode from The Roy Adaptation Model: The Definitive Statement (p. 357). Roy, S. C., & Andrews, H. A. (1991).

progresses the soon-to-be parents begin to seek information on the new parent role by reading, talking to other parents and especially to their own parents to learn the instrumental and expressive behaviors that they will need in fulfilling their new roles.

When ineffective role transition occurs a variety of factors may be involved. There may be no role models, or the role models available might be so poor that the non-parents are unable to create an image of themselves as a nurturing parent. There may also be incongruity between societal expectations and their own beliefs. These can be indicators of potential role conflict. Potential role failure may be assessed from a prospective parent's lack of knowledge regarding child development and the needs of infants. The inappropriate expectations of new parents may lead to disappointment which is functionalized as either role distancing or role failure. Child abuse and neglect may be one sign of at least partial role failure. By assessing the stimuli affecting role transition (see Figure 1) and intervening when appropriate, the nurse may prevent adaptation problems. It was with that goal in mind that Bavolek (1984) created the Adult-Adolescent Parenting Inventory (Appendix A).

Parenting Attitudes

Bavolek (1984) studied parenting attitudes of abusive and neglectful parents and found them to be different from non-abusive non-neglecting parents. He spent three years creating the Adult-Adolescent Parenting Inventory. The inventory was designed to detect those parenting attitudes which are frequently

associated with child abuse and neglect. Those attitudes or constructs are further described by Bavolek as including:

1. *Inappropriate parental expectations of the child.* Beginning very early in the infant's life, abusing parents inaccurately perceive the skills and abilities of their child. The infant is expected to perform in a manner incongruent to what may reasonably be expected for his/her developmental stage. The basis for this problem stems from the abusing parents' lack of a knowledge base relative to the capabilities and needs of a child at each developmental stage. Often, inappropriate expectations surround such activities as eating, bathing, and toileting. Treated as if the child were older than he/she really is, the child is often left to care for him/herself.

2. *Inability of the parent to be empathetically aware of the child's needs.* Empathetic awareness of a child's needs entails the ability of a parent to understand the condition or state of mind of the child without actually experiencing the feelings of the child. Abusing parents often demonstrate an inability to be empathetically aware of their infant's or child's basic needs. Based on a fear of "spoiling" their child, abusing parents often ignore their child resulting in inattention to the child's basic needs. The child is seldom loved or nurtured. A high premium is placed on the child being good, acting right, and learning to be obedient. However, what constitutes "good" behavior is seldom clarified.

3. *Parental value of physical punishment.* Physical attacks by the abusing parent are not often a haphazard, uncontrolled, impulsive discharge of aggression by the parent onto the infant. On the contrary, studies appear to indicate that abusing parents utilize physical punishment as a unit of behavior designed to punish and correct specific bad conduct or inadequacy on the part of the child. Abusing parents not only consider physical punishment a proper disciplinary measure but strongly defend their right to use physical force.

4. *Parent-child role reversal.* Abusing parents often look to the child for satisfaction of their own emotional needs. Usually described as "role reversal," the child is expected to be the source of comfort and care; to be sensitive to and responsible for much of the happiness of his/her parents. The child is further expected to make life more pleasurable for the parents by providing love, assurance, and a feeling that the parent is a needed, worthwhile individual.

Bavolek's tool may be useful in assessing the stimuli affecting role transition from non-parent to parent. The consequences of ineffective role transition are sometimes as serious as child abuse and neglect. Nurses need to assess the role transition from non-parent to parent for patterns, including parenting attitudes, that indicate either effective role transition or ineffective role transition.

CHAPTER 3

The Method

The purpose for this study was to examine the parenting attitudes of expectant couples in the Air Force. The content of this section includes: an overview of the design and instrument, target population demographics, sampling methods, data analysis plan, limitations of the study, and its significance to nursing.

Design/Instrument

A non-experimental design using a descriptive survey approach was used to examine the parenting attitudes of expectant couples associated with the Air Force. The AAPI is an attitudinal survey consisting of thirty-two items or statements to which subjects rate their level of agreement. A Likert-type scale with a five point selection range, the AAPI was chosen for it's ease of administration and scoring and for it's high reliability (Bavolek, 1984). The tool takes approximately fifteen to twenty minutes to complete. It may be administered to a group or to an individual.

Two forms (A and B) of the tool are available. The wording is altered on eleven of the items on form B. On form A the responses strongly agree, agree, uncertain, disagree, and strongly disagree are scored 1-5 respectively. Form B alternates between the forward and reverse scoring of items. Odd numbered items are scored 1-5, and even numbered items are scored 5-1. The thirty-two item responses are then divided into four sub-scales (constructs). Each sub-scale consists of the numerical responses to 6-10 items. Individual sub-scales can be

assessed as can total test response. Permission to use the tool was received per telephone conversation with Stephen Bavolek. Following the conversation, tools were purchased from Family Development Resources, Inc., 3160 Pinebrook Road, Park City, Utah.

Reliability and Validity of the Instrument

Although initially established using an adolescent population, reliability and validity have since been established for both the normative and abusing adult populations. Content validity was established by:

disseminating the item pool and the construct definitions to experts from disciplines related to child rearing, parenting education, child abuse, family life, and test construction.... The results of the content validation activities indicated 100 percent agreement among the experts relative to the accuracy of the identification and description of the four abusive parenting constructs (Bavolek, 1984, p. 10).

Construct validity of the AAPI was established through the analysis of data generated from inter-item correlations (.17-.53, mode .25), item-construct correlations (.53-.75), and factor analysis measure of sampling adequacy (MSA) for all items .93-.94 indicating that the covariance matrix was well suited for factor analysis (p. 13-15).

High internal reliability was indicated by alpha coefficients of .75-.86 for adults. The diagnostic validity, "the ability of the inventory to assess parenting strengths and weaknesses in four areas of parent-child interaction" (Bavolek,

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back into the envelope, and envelopes were placed in a box at the front of the classroom for collection by the researcher.

Ethical Considerations

This proposal was reviewed by the Human Subjects Research Review Committee of Arizona State University (Appendix C), and USAF regulation 30-23 attachment 2 (Request to conduct research within the military) was submitted and approved (Appendix D) prior to contacting any subjects.

Participants were reminded that their participation was voluntary and that they could choose to withdraw their participation at any time. Completion of the tool indicated their consent. Individual participation was not known at any time by the researcher. No identifying information other than brief demographics was ever obtained by the researcher, and it was so stated to the participants. Results in aggregate form are reported within this thesis, a copy of which will be sent to the United States Air Force.

Data Analysis Plan

The AAPI had a pre-established ANOVA analysis plan which included dividing the data into the applicable sub-scales. Following that, raw scores for each sub-scale were added. Raw score means and standard deviations were established for each subject group/construct. Raw scores were also converted to standardized scores for comparison to normative population scores. Subject group data were compared to grouped normative adult non-abusive population

data, and were also analyzed according to sex. A minimum of 60 subjects were required.

Limitations

This was a descriptive survey of a volunteer subject group. Information obtained may not be generalizable to the target population.

Significance to Nursing

This tool had not been used previously with this target population. If it were found to discriminate between non-abusive and abusive parenting attitudes, it could become useful to use as a routine prenatal assessment tool.

CHAPTER 4

Results

The purpose of this study was to examine the parenting attitudes of people who were expecting their first child while associated with the Air Force. Included in this chapter is a description of the population sample, a review of the data collected as they relate to each of the research questions, and a review of the additional information received during the course of data collection.

Demographic Characteristics

The participants in this study were receiving their prenatal care and education at two Air Force bases in the Phoenix, Arizona area; Luke AFB, and Williams AFB. Subjects completed a brief demographic section on the tool before completing the tool. All participants were having their first child. The other demographic information obtained included: age, education level, military status, gender, and race. Demographic characteristics are included in Table 2.

Questionnaires were completed by 114 people attending either the Obstetrical Orientation or the preparation for child birth courses. Of those completed, 67 met the criteria of first time parent for inclusion in this study. There were 30 males and 37 females included in the study. The age range was from 20 to 44 years. The majority of participants (72.6%) were between 20 and 27 years old.

Table 2

Demographic Characteristics of Sample

Characteristic	n	%
Gender		
Males	30	44.8
Females	37	55.2
Age (years)		
20-23	19	28.3
24-27	29	43.3
28-31	12	17.9
32-35	4	6.0
36-39	1	1.5
40-44	2	3.0
Race		
White	51	76.0
Black	6	9.0
Asian	4	6.0
Hispanic	3	4.5
Oriental	1	1.5
American Indian	1	1.5
Other	1	1.5
Education (years)		
12	28	41.8
13-15	19	28.3
16	13	19.4
18	5	7.5
21	1	1.5
Other*	1	1.5

Table continues

Table 2 (continued)

Characteristic	n	%
Status		
Active Duty	30	44.8
Dependent Wife	33	49.2
Dependent Husband	4	6.0
Rank		
Officer	10	14.9
Officer Dependent	15	22.4
Enlisted	20	29.9
Enlisted Dependent	22	32.8

Note. *missing data

The majority of respondents (76%) were white, 9% of the sample was black. The remaining 15% were Hispanic, Asian, Oriental, American Indian, and Other. No analysis was done to determine racial differences due to the inadequate sample size of any single group, excluding whites.

Educational data shows that all participants had at least 12 years of formal education, and 58.2% had 13 or more years. The range in education was from 12-21 years. This sample was made up of predominately young, white, well educated people.

Active duty military members made up 44.8% of the sample group, dependent wives made up 49.2% and dependent husbands made up 6% of the group. Officers and their dependents made up 14.9% and 22.4% respectively,

while enlisted members and their dependents made up 29.9% and 32.8% of the group respectively.

Research Questions

In this section, the original research questions are reviewed and the data gathered in response to those questions are reported.

Question one. What are the parenting attitudes of women expecting their first child?

The data are divided into the four constructs as used in the AAPI: Construct A, parental expectations; Construct B, empathetic awareness and concern; Construct C, corporal punishment; and Construct D, parent-child role.

High scores in Construct A, parental expectations, requires some knowledge of child development (maximum possible score 30). The females in this sample scored lower in this area than the normative population. The sample mean was 22.81 compared to 24.51 for the normative population. Table 3 compares mean scores and standard deviations of the sample females with those of the normative population.

Construct B, empathy, measures the ability to understand the feelings of children. High scores indicate the valuing of the needs of children (maximum possible score 40). The sample females mean (33.67) was slightly higher than the normative population mean (32.45) in this area.

Construct C, corporal punishment, measures the degree of agreement or disagreement with the use of corporal punishment to discipline children. A high

Table 3

Means and Standard Deviations of Females and Normative Population

Construct	Sample		Norm Pop	
	\bar{x}	SD	\bar{x}	SD
A				
Parental Expectations	22.81	2.85	24.51	3.40
B				
Empathy	33.68	3.79	32.45	4.67
C				
Corporal Punishment	35.05	5.58	35.42	6.77
D				
Parent-Child Role	30.91	4.76	28.73	5.87

score in this area indicates strong belief in alternative discipline methods (maximum possible score 50). In this area, the mean of the sample females (35.05) was very similar to the normative population mean (35.42).

Construct D, parent-child roles, measures understanding of appropriate parent responsibilities and appropriate child responsibilities. A high score in this area indicates a good understanding of the parent-child roles (maximum possible score 40). The mean scores for sample females (30.92) was higher than that of the normative population (28.73).

Sten scores as used for interpretation of the AAPI indicate the degree of risk for parenting problems that an individual or group has. Scores of 1-2 indicate high risk attitudes, scores of 3-4 indicate an increased risk for parenting

problems over the population norm. AAPI score interpretation indicates that 30.9% of the normative population demonstrates some degree of risk (scores 1-4) for each of the constructs. Scores higher than four indicate average or above average positive parenting attitudes. Throughout the discussion of the data, the sten scores 1-2, 3-4 have been combined. The sample groups were compared to the normative population for percentage of the group which scored 'at risk' on the AAPI (see Table 4).

When compared to the expected at risk percentage for the normative population (30.9) the sample females had fewer at risk in constructs B and C while a higher percentage were at risk in constructs A and D. For construct A, parental expectations, 45.9% of sample females scored 'at risk.' Construct B, empathy, had only 16.2% of the sample females at risk. Construct C, corporal punishment, placed 40.5% of sample females at risk. Construct D, parent-child roles, showed the risk at 18.9% of the sample females.

The mean scores and standard deviations of the white female sub-group of the sample (see Table 5) were reviewed and found to be very similar to those of the normative sex/race specific white female population.

Sten score interpretation for the white female sub-group of subjects (see Table 6) shows a higher percentage at risk than expected in one construct. Construct A, parental expectations shows 44.8% of the sub-group at risk, 12.9% more at risk than the 31.9 expected. The other constructs all demonstrate fewer

at risk in this sub-group than expected: 24.1% in construct B, empathy; 31.1% in C, corporal punishment; and 24.1% in construct D, parent-child role.

Table 4

Sten Scores of Females Using AAPI Score Interpretation

Scores	Ex- pected %	Constructs							
		A		B		C		D	
		n	%	n	%	n	%	n	%
1-2	6.7								
Significant deficiencies in appropriate parenting		5	13.5	0	0.0	0	0.0	1	2.7
3-4	24.2								
Deficiencies in some behavior but have some strengths		12	32.4	6	16.2	15	40.5	6	16.2
5-6	38.4								
average reflect 'norm'		14	37.8	14	37.8	10	27.0	14	37.8
7-8	24.2								
exceed average expectations		6	16.2	13	35.1	6	16.2	14	37.8
9-10	6.7								
very positive nurturing behaviors		0	0.0	4	10.8	6	16.2	3	8.1

Table 5

Mean Scores and Standard Deviations of White Females and Normative White Female Population

Construct	Sample		Norm Pop	
	\bar{x}	SD	\bar{x}	SD
A Parental	23.06	2.69	24.07	3.73
B Empathy	34.00	3.64	33.72	4.36
C Corporal Punishment	36.14	5.56	36.68	6.67
D Parent-Child Role	31.24	4.50	30.60	5.56

Table 6

Sten Scores of White Females Using AAPI Score Interpretation

Scores	Constructs								
	Ex- pected %	A		B		C		D	
		n	%	n	%	n	%	n	%
1-2	6.7								
Significant deficiencies in appropriate parenting		2	6.9	0	0.0	1	3.5	2	6.9
3-4	24.2								
Deficiencies in some behaviors but have some strengths		11	37.9	7	24.1	10	27.6	5	17.2
5-6	38.4								
average reflect 'norm'		14	48.3	10	34.5	11	37.9	14	48.3
7-8	24.2								
exceed average expectations		2	6.9	12	41.4	7	24.1	8	27.6
9-10	6.7								
very positive nurturing behaviors		0	0.0	0	0.0	0	0.0	0	0.0

Question number two. What are the parenting attitudes of men expecting their first child? The male sample consisted of thirty participants. Their raw

scores were compared to normative population scores on each of the four constructs (see Table 7).

For Construct A, parental expectations, the mean of the sample males (22.86) was below the mean of the normative population (24.51). For Construct B, empathy, the mean score for the sample males was 31.0 compared to 32.45 for the normative population mean. On Construct C, corporal punishment, the sample males mean was 33.17, and the normative population mean was 35.42. Construct D, parent-child roles, mean of the sample males was 28.83 compared to 28.73 for the normative population mean.

Sten score interpretation was also done for the male sample (see Table 8). The percentages of sten scores indicating participants 'at risk' for parenting problems of the sample males was compared to the expected percentages in the normative population. In the normative population 30.9% of the population would fall within the 'at risk' (sten scores 1-4) group for each construct. Sample males fell into the 'at risk' group 40% of the time for construct A, parental expectations; 46.7% of the time for construct B, empathy; 56.7% were at risk in construct C, corporal punishment; and 29.9% were at risk in construct D, parent-child roles.

Table 7

Means and Standard Deviations of Males and Normative Population

Construct	Sample		Norm Pop	
	\bar{x}	SD	\bar{x}	SD
A				
Parental Expectations	22.93	3.44	24.51	3.40
B				
Empathy	31.00	4.96	32.45	4.67
C				
Corporal Punishment	33.16	7.90	35.42	6.77
D				
Parent-Child Role	28.83	5.16	28.73	5.87

Table 8

Sten Scores of Males Using AAPI Score Interpretation

Scores	Ex- pected %	Constructs							
		A		B		C		D	
		n	%	n	%	n	%	n	%
1-2	6.7								
Significant deficiencies in appropriate parenting		5	16.7	3	10.0	4	13.3	4	13.3
3-4	24.2								
Deficiencies in some behaviors but have some strengths		7	23.3	11	36.7	13	43.3	5	16.6
5-6	38.4								
average reflect 'norm'		10	33.3	10	33.3	4	13.3	16	53.3
7-8	24.2								
exceed average expectations		8	26.7	3	10.0	7	23.3	4	13.3
9-10	6.7								
very positive nurturing behaviors		0	0.0	3	10.0	2	6.7	1	3.3

Mean scores and standard deviation scores for the white/male sub-group of subjects was compared to the normative data for white males (see Table 9).

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Table 10

Sten Scores of White Males Using AAPI Score Interpretation

Scores	Constructs								
	Ex- pected %	A		B		C		D	
		n	%	n	%	n	%	n	%
1-2	6.7								
Significant deficiencies in appropriate parenting		2	9.1	1	4.6	4	18.2	1	4.6
3-4	24.2								
Deficiencies in some behaviors but have some strengths		5	22.7	8	36.4	4	18.2	2	9.1
5-6	38.4								
average reflect 'norm'		7	31.8	8	36.4	4	18.2	11	50.0
7-8	24.2								
exceed average expectations		6	27.3	3	13.6	8	36.4	6	27.3
9-10	6.7								
very positive nurturing behaviors		2	9.1	2	9.1	2	9.1	2	9.1

Question number three. How do the parenting attitudes of women expecting their first child differ from the parenting attitudes of men expecting their first child?

t-Test analysis was used to compare raw score means of the male and female sample groups (see Table 11). Construct A, parental expectations shows mean scores very similar between males (22.93) and females (22.81). The t was 0.16 which was found not to be significant. In construct B, empathy, means were more deviant with the male mean (31.0) significantly lower than the female mean (33.68). The t was 2.50 with a p of .015. Construct C, corporal punishment, showed no significant difference between males and females. Mean scores were 33.17 and 35.05 respectively, with a t of -1.14. Construct D, parent-child roles showed no significant difference between males and females with mean scores of 28.83 for males and 30.92 for females, $t=-1.72$.

Table 11

Comparison of Means and Standard Deviations by Sex Using t-test

Construct	Sex	Sample \bar{x}	SD	t	Norm Pop p
A					
Parental Expectations	M	22.93	3.44	0.16	NS
	F	22.81	2.85		
B					
Empathy	M	31.00	4.96	-2.50	.015
	F	33.68	3.79		
C					
Corporal Punishment	M	33.16	7.90	-1.14	NS
	F	35.05	5.58		
D					
Parent-Child Roles	M	28.83	5.16	-1.72	NS
	F	30.91	4.76		

Table 12 compares sten scores of the sample males and females. Using the AAPI interpretation for 'at risk' as being a sten score of four or below in any of the parenting constructs the males and females were compared to each other as they have already been compared to the normative population. In the sample group the males exceed the risk of the normative population in three of the four constructs, while the women exceed the risk of the normative population in two of the four constructs. Both males and females exceed the risk expected on construct A; 9.1% more of the men and 15% more of the women fit into the risk category than would be expected. For construct B, empathy, there are 15.8%

Table 12

Sten Scores of Males and Females Using AAPI Score Interpretation

Scores	Constructs								
	Ex- pected %	A		B		C		D	
		n	%	n	%	n	%	n	%
<hr/>									
1-2									
Male		5	16.7	3	10.0	4	13.3	4	13.3
Female		5	13.5	0	0.0	0	0.0	1	2.7
Total	6.7	10	14.9	3	4.5	4	6.0	5	7.5
3-4									
Male		7	23.3	11	36.7	13	43.3	5	16.6
Female		12	32.4	6	16.2	15	40.5	6	16.2
Total	24.2	19	28.4	17	25.4	28	41.8	11	16.4
5-6									
Male		10	33.3	10	33.3	4	13.3	16	13.3
Female		14	37.8	14	37.8	10	27.0	14	37.8
Total	38.4	24	35.8	24	35.8	14	20.9	30	44.8
7-8									
Male		8	26.7	3	10.0	7	23.3	4	13.3
Female		6	16.2	13	35.1	6	16.2	14	37.8
Total	24.2	14	20.9	16	23.8	13	19.4	18	26.7
9-10									
Male		0	0.0	3	10.0	2	6.7	1	3.3
Female		0	0.0	4	10.8	6	16.2	3	8.1
Total	6.7	0	0.0	7	10.4	8	11.9	4	6.0

more men at risk than was expected, while the women have 14.7% less at risk than was expected. The difference between the men and the women in this construct is 30.5%. For construct C, corporal punishment, 56.9% of the men are

30.5%. For construct C, corporal punishment, 56.9% of the men are at risk compared to 40.5% of the women. Of note in this construct is that although 16.4% more of the men are at risk than women, both groups exceed the expected percentages; the men by 26.0%, the women by 9.6%. Construct D, parent-child roles shows the males at risk to be 29.9% and the females risk to be 18.9%, a difference of 11%.

Additional Information

Additional information was gathered in the form of comments made at the end of the questionnaires. A total of eleven participants made comments. These comments are included verbatim in Appendix E. Briefly, participants commented that the questionnaire was very negative, very vague, too specific, very judgmental, very ambiguous, and very contradictory.

CHAPTER 5

Discussion, Conclusion and Recommendations

This study was initiated to see if the AAPI would be a useful tool in the primary prevention of child abuse through prenatal detection of negative parenting attitudes. The Air Force was chosen in part because it was a population to which the researcher had access and in part because the researchers future practice will be within the Air Force. The risk factors of high mobility, lack of familial support systems, and frequent parent absence are not within the control of the individual military member. The researcher therefore felt that parenting attitudes are extremely important in determining how these and other stressors impact on family dynamics. This chapter includes a discussion of the parenting attitudes detected in the sample of men and women associated with the Air Force. Conclusions are drawn, and recommendations are made based on those findings.

The participants were approached during their attendance at prepared childbirth classes or the new obstetrical orientation classes. Participation was not known by the researcher. The questionnaires were scored and scores were transferred to the AAPI worksheet. Analysis was done both on raw scores and on standard scores.

The study participants were not representative of the Air Force population in the area of race. The sample group was 9% black while the Air Force population is 15.9% black. Other ethnic groups made up 15% of the sample, yet they make up only 3.9% of the Air Force population.

Mean scores and standard deviations were used to determine differences between the sample group and the normative population. That technique could not identify the percentage of the sample group at risk for parenting problems. By using means the high scores offset the low scores, demonstrating that the means of the sample were very similar to those of the normative population. Sten score interpretation lent itself better to the detection of the 'at risk' attitudes. Using sten score interpretation it was possible to see at a glance that a much larger percentage of the sample group appeared to be 'at risk' for parenting problems than would be expected in the normative population.

The normative population data were gathered from a large sample, $N=1,239$, of both males and females with diverse geographic, ethnic and religious backgrounds (Bavolek, 1984). For accurate analysis of this sample the normative data may not have been specific enough. Studies done by Figoten and Tanner, Clark, and Green and Calder (Bavolek, 1984) cite the statistical significance of such variables as gender, age, race, religion, socioeconomic status and the number of children parented.

When compared to the normative population data, the aggregate sample scored 'at risk' in two of the construct: parental expectations and corporal punishment. That difference may be due in part to their own inexperience with child rearing, their own childhood experience, or the lack of parenting role models. The cause can only be speculated upon. Regardless of the cause of these low scores, the scores indicate a need for preventive intervention.

Sten scores for the female sample compared to the normative population indicate a lower percentage of females at risk than does the sex/race specific analysis for the white female subgroup in two of the constructs, empathy (+7.9%) and parent-child roles (+3.2%). Decreased percentages in the sex/race specific analysis of white females were at risk in the corporal punishment construct (-9.4%), and the risk remained almost unchanged in the parental expectation construct(-1.1%).

The differences between normative population data and sex/race specific data for white males is even more striking than for the females. Sample means and standard deviations were nearly identical to the sex/race specific normative population of white males with the exception of construct C, corporal punishment. The standard deviation for the sample was 8.96 vs. 6.26 for the normative population indicating a greater diversity in scores for the sample group. Actual distribution of sten scores for the sample reflected a nearly equal number of lows (36.4%) and high scores (45.5%) and fewer average scores (18.2%).

Sten scores indicating an 'at risk' status for males changed in construct A, parental expectations, from 40% to 31.8% when sex/race analysis of white males was done. The other construct scores also changed. Construct B, empathy changed from 56.7% at risk to 36.4%, construct C, corporal punishment, changed from 56.7% to 36.4% and construct D changed from 29.9% to 13.7%. These percentages represent a completely different view of these sub-groups.

Bavolek (1984) states that there is a significant increase in abusive attitudes among races other than white. It could be argued that the AAPI is not a culturally sensitive tool, or that the increase is due to other factors than race. No link has been identified between race and maltreatment (USDHHS, 1988a). Bavolek (1984) has developed normative data for both the black and white, adolescent and adult, abusive and non-abusive populations, but there is no normative data for other races, and there is no sex only normative data.

When male and female parenting attitudes were compared using the normative population sten scores both groups appeared to be at risk, with the male risk exceeding the female risk on construct B, empathy, and construct C, corporal punishment by 30.5% and 16.4% respectively. A greater percentage of women than men were at risk in construct A, parental expectations (5.9%).

When sex/race specific analysis was done for the sub-groups of white male/white female subjects, the percentages at risk decreased overall, with the men decreasing more than the women.

Sub-group analysis of the four constructs revealed that 13% more females were at risk than men for construct A, parental expectations. For construct B, the difference between males and females dropped from 30.5% to 16.9%. This highlights the difference that the different variables in a population can make in the data analysis. If other unknown variables also impact on interpretation that much, any conclusions reached from such an interpretation would be suspect. The males of the sub-group remained 'at risk' in construct B, as they did in

The males of the sub-group remained 'at risk' in construct B, as they did in construct C. Construct C showed the men to have 5.3% greater at risk than the females. Both sub-groups were less at risk than the sex/race specific normative populations.

Conclusions

The conclusions of this study are:

1. The sample females appear to be at greater risk for parenting problems than the normative population.
 - a. Sample females appear to have decreased understanding of child development. This remains true even in sex/race specific analysis of the white female sub-group.
 - b. Sample females have an increased belief in the use of corporal punishment in the discipline of children than does the normative population.
2. The sample males appear to be at greater risk for parenting problems than the normative population.
 - a. Sample males appear to have decreased understanding of child development.
 - b. Sample males appear to have less understanding of and to place less value on the thoughts and feelings of children than the normative population. This remains true even in sex/race specific analysis of the white male sub-group.

- c. Sample males have an increased belief in the use of corporal punishment in the discipline of children than does the normative population. This remains true even in sex/race specific analysis of the white male sub-group.

3. Sample males appear to have a better understanding about child development than do sample females. This remains true even in sex/race specific analysis of the white sub-groups.

4. Sample females appear to understand and value the thoughts and feelings of children more than the sample males. This remains true even in sex/race specific analysis of the white sub-groups.

5. Sample males have an increased belief in the use of corporal punishment in the discipline of children than do the sample females. This remains true even in sex/race specific analysis of the white sub-group.

6. Both the male and female sample appear to have a good understanding of parent-child roles.

Limitations

1. This was a limited study and a convenience sample. Conclusions may not be generalizable to the target population.

2. There was limited participation by the black population associated with the Air Force, therefore racial analysis was not possible.

3. None of the participants had any children which may confound the comparison to the normative adult population.

Recommendations

1. Further research is needed using this tool with this population.
2. Parenting classes should be incorporated into routine prenatal care.
3. In future research using this tool, increased demographic information should be obtained.
4. This or a similar screening tool should be used prenatally to identify those people most at risk for parenting problems.
5. Follow up should be automatic for those scoring in the very high risk group.

Summary

According to Roy's adaptation model (Roy & Andrews, 1991), the assessment of the contextual stimuli, as accomplished using the AAPI, demonstrate that a larger percentage of the Air Force sample is risk at for role transition problems than would be expected from the normative population. The review of literature has shown that the normative population in the United States is also at risk for parenting role problems. Nurses are in a position to change the contextual stimuli of expectant parents through early assessment of role transition problems and interventions including support, teaching, and referral.

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APPENDIX A

Adult-Adolescent Parenting Inventory

Forms A and B

Profile Worksheet

Adult-Adolescent Parenting Inventory

AAPI

Form A

Stephen J. Bavolek, Ph.D.

Status Dependant 0 1 2 3 4 5 6 7 8 9
Active Duty E Age years

Sex: (Circle one) Male Female

Race: (Circle one) White Black Hispanic Asian Oriental American Indian

Other:

If Appropriate: School Name: Grade Level:

INSTRUCTIONS: There are 32 statements in this booklet. They are statements about parenting and raising children. You decide the degree to which you agree or disagree with each statement by circling one of the responses.

STRONGLY AGREE – Circle SA if you strongly support the statement, or feel the statement is true most or all the time.

AGREE – Circle A if you support the statement, or feel this statement is true some of the time.

STRONGLY DISAGREE – Circle SD if you feel strongly against the statement or feel the statement is not true most or all the time.

DISAGREE – Circle D if you feel you cannot support the statement or that the statement is not true some of the time.

UNCERTAIN – Circle U only when it is impossible to decide on one of the other choices.

When you are told to turn the page, begin with Number 1 and go on until you finish all the statements. In answering them, please keep these four points in mind:

1. Respond to the statements truthfully. There is no advantage in giving an untrue response because you think it is the right thing to say. There really is no right or wrong answer – only your opinion.
2. Respond to the statements as quickly as you can. Give the first natural response that comes to mind.
3. Circle only one response for each statement.
4. Although some statements may seem much like others, no two statements are exactly alike. Make sure you respond to every statement.

If there is anything you don't understand, please ask your questions now. If you come across a word you don't know while responding to a statement, ask the examiner for help.

When you finish, please feel free to write any comments you have on the back page.

Turn the Page and Begin

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 3180 Pinetree RD, Park City, UT 84060

AATA

Form A

	Strongly Agree	Agree	Uncertain	Disagree	Strongly Disagree
1. Young children should be expected to comfort their mother when she is feeling blue.	SA	A	U	D	SD
2. Parents should teach their children right from wrong by sometimes using physical punishment.	SA	A	U	D	SD
3. Children should be the main source of comfort and care for their parents.	SA	A	U	D	SD
4. Young children should be expected to hug their mother when she is sad.	SA	A	U	D	SD
5. Parents will spoil their children by picking them up and comforting them when they cry.	SA	A	U	D	SD
6. Children should be expected to verbally express themselves before the age of one year.	SA	A	U	D	SD
7. A good child will comfort both of his/her parents after the parents have argued.	SA	A	U	D	SD
8. Children learn good behavior through the use of physical punishment.	SA	A	U	D	SD
9. Children develop good, strong characters through very strict discipline.	SA	A	U	D	SD
10. Parents should expect their children who are under three years to begin taking care of themselves.	SA	A	U	D	SD
11. Young children should be aware of ways to comfort their parents after a hard day's work.	SA	A	U	D	SD
12. Parents should slap their child when s/he has done something wrong.	SA	A	U	D	SD
13. Children should always be spanked when they misbehave.	SA	A	U	D	SD
14. Young children should be responsible for much of the happiness of their parents.	SA	A	U	D	SD
15. Parents have a responsibility to spank their children when they misbehave.	SA	A	U	D	SD

Please go to next page.

Form A

	Strongly Agree	Agree	Uncertain	Disagree	Strongly Disagree
16. Parents should expect their children to feed themselves by twelve months.	SA	A	U	D	SD
17. Parents should expect their children to grow physically at about the same rate.	SA	A	U	D	SD
18. Young children who feel secure often grow up expecting too much.	SA	A	U	D	SD
19. Children should always "pay the price" for misbehaving.	SA	A	U	D	SD
20. Children under three years should be expected to feed, bathe, and clothe themselves.	SA	A	U	D	SD
21. Parents who are sensitive to their children's feelings and moods often spoil their children.	SA	A	U	D	SD
22. Children deserve more discipline than they get.	SA	A	U	D	SD
23. Children whose needs are left unattended will often grow up to be more independent.	SA	A	U	D	SD
24. Parents who encourage communication with their children only end up listening to complaints.	SA	A	U	D	SD
25. Children are more likely to learn appropriate behavior when they are spanked for misbehaving.	SA	A	U	D	SD
26. Children will quit crying faster if they are ignored.	SA	A	U	D	SD
27. Children five months of age ought to be capable of sensing what their parents expect.	SA	A	U	D	SD
28. Children who are given too much love by their parents often grow up to be stubborn and spoiled.	SA	A	U	D	SD
29. Children should be forced to respect parental authority.	SA	A	U	D	SD
30. Young children should try to make their parent's life more pleasurable.	SA	A	U	D	SD
31. Young children who are hugged and kissed usually grow up to be "sissies."	SA	A	U	D	SD
32. Young children should be expected to comfort their father when he is upset.	SA	A	U	D	SD

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Please feel free to write your comments on this page.

Adult-Adolescent Parenting Inventory AAPI

Form B

Stephen J. Bavolek, Ph.D.

Dependant _____ 0 1 2 3 4 5 6 7 8 9
Status Active Duty _____ E _____ Age: _____ years

Sex: (Circle one) Male Female

Race: (Circle one) White Black Hispanic Asian Oriental American Indian

Other: _____

If Appropriate: School Name: _____ Grade Level: _____

INSTRUCTIONS: There are 32 statements in this booklet. They are statements about parenting and raising children. You decide the degree to which you agree or disagree with each statement by circling one of the responses.

STRONGLY AGREE – Circle SA if you strongly support the statement, or feel the statement is true most or all the time.

AGREE – Circle A if you support the statement, or feel this statement is true some of the time.

STRONGLY DISAGREE – Circle SD if you feel strongly against the statement or feel the statement is not true most or all the time.

DISAGREE – Circle D if you feel you cannot support the statement or that the statement is not true some of the time.

UNCERTAIN – Circle U only when it is impossible to decide on one of the other choices.

When you are told to turn the page, begin with Number 1 and go on until you finish all the statements. In answering them, please keep these four points in mind:

1. Respond to the statements truthfully. There is no advantage in giving an untrue response because you think it is the right thing to say. There really is no right or wrong answer – only your opinion.
2. Respond to the statements as quickly as you can. Give the first natural response that comes to mind.
3. Circle only one response for each statement.
4. Although some statements may seem much like others, no two statements are exactly alike. Make sure you respond to every statement.

If there is anything you don't understand, please ask your questions now. If you come across a word you don't know while responding to a statement, ask the examiner for help.

When you finish, please feel free to write any comments you have on the back page.

Turn the Page and Begin

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3160 Pinebrook RD, Park City, UT 84060

AATB

Form B

	Strongly Agree	Agree	Uncertain	Disagree	Strongly Disagree
1. Young children should be expected to comfort their mother when she is feeling blue.	SA	A	U	D	SD
2. Parents should never use physical punishment to teach their children right from wrong.	SA	A	U	D	SD
3. Children should not be the main source of comfort and care for their parents.	SA	A	U	D	SD
4. Young children should be expected to hug their mother when she is sad.	SA	A	U	D	SD
5. Parents will spoil their children by picking them up and comforting them when they cry.	SA	A	U	D	SD
6. Children should not be expected to talk before the age of one year.	SA	A	U	D	SD
7. A good child will comfort both of his/her parents after the parents have argued.	SA	A	U	D	SD
8. Children seldom learn good behavior through the use of physical punishment.	SA	A	U	D	SD
9. Children develop good, strong characters through very strict discipline.	SA	A	U	D	SD
10. Children under three years should not be expected to take care of themselves.	SA	A	U	D	SD
11. Young children should be aware of ways to comfort their parents after a hard day's work.	SA	A	U	D	SD
12. Parents should never slap their child when s/he has done something wrong.	SA	A	U	D	SD
13. Children should always be spanked when they misbehave.	SA	A	U	D	SD
14. Young children should not be responsible for the happiness of their parents.	SA	A	U	D	SD
15. Parents have a responsibility to spank their children when they misbehave.	SA	A	U	D	SD

Please go to next page.

Form B

	Strongly Agree	Agree	Uncertain	Disagree	Strongly Disagree
16. Parents should expect their children to feed themselves by twelve months.	SA	A	U	D	SD
17. Parents should expect their children to grow physically at about the same rate.	SA	A	U	D	SD
18. Young children who feel secure often grow up expecting too much.	SA	A	U	D	SD
19. Children should always "pay the price" for misbehaving.	SA	A	U	D	SD
20. Children under three years should not be expected to feed, bathe, and clothe themselves.	SA	A	U	D	SD
21. Parents who are sensitive to their children's feelings and moods often spoil their children.	SA	A	U	D	SD
22. Children often deserve more discipline than they get.	SA	A	U	D	SD
23. Children whose needs are left unattended will often grow up to be more independent.	SA	A	U	D	SD
24. Parents who encourage communication with their children only end up listening to complaints.	SA	A	U	D	SD
25. Children are more likely to learn appropriate behavior when they are spanked for misbehaving.	SA	A	U	D	SD
26. Children will quit crying faster if they are ignored.	SA	A	U	D	SD
27. Children five months of age are seldom capable of sensing what their parents expect.	SA	A	U	D	SD
28. Children who are given too much love by their parents often grow up to be stubborn and spoiled.	SA	A	U	D	SD
29. Children should never be forced to respect parental authority.	SA	A	U	D	SD
30. Young children should try to make their parent's life more pleasurable.	SA	A	U	D	SD
31. Young children who are hugged and kissed usually grow up to be "sissies."	SA	A	U	D	SD
32. Young children should not be expected to comfort their father when he is upset.	SA	A	U	D	SD

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AAPI Profile Worksheet

Form A or B

Name: _____ Age: _____ yrs. Sex: _____ Race: _____

Date: Pretest _____ Posttest _____

School/Agency: _____ Grade: _____ City: _____

CONSTRUCT A Inappropriate Expectations		CONSTRUCT B Empathy		CONSTRUCT C Corporal Punishment		CONSTRUCT D Role Reversal	
Item	Raw Score	Item	Raw Score	Item	Raw Score	Item	Raw Score
6	_____	5	_____	2	_____	1	_____
10	_____	18	_____	8	_____	3	_____
16	_____	21	_____	9	_____	4	_____
17	_____	23	_____	12	_____	7	_____
20	_____	24	_____	13	_____	11	_____
27	_____	26	_____	15	_____	14	_____
		28	_____	19	_____	30	_____
		31	_____	22	_____	32	_____
				25	_____		
				29	_____		

TOTAL RAW SCORE

Refer to Norm Tables in the Test Handbook to establish Standard Scores.
Use either the Adolescent Norms (12 to 19 years) or Adult Norms (20 + years).

STANDARD SCORES

Abused Adolescent

Non-abused Adolescent

Abusive Adult

Non-abusive Adult

APPENDIX B

Verbal Script

Parenting Attitudes of Expectant Couples
Associated with the Air Force

Verbal Script

I am a graduate student under the direction of Professor Joyce Finch, in the College of Nursing at Arizona State University. I am conducting a research study titled "Parenting Attitudes of Expectant Couples Associated with the Air Force". The purpose of the research is to examine the parenting attitudes of Air Force Couples. I am recruiting subjects to complete a survey which will take approximately fifteen to twenty minutes.

Your participation in this study is voluntary. If you choose not to participate it will not effect your class status or your care. The results of the study may be published, but your name will not be used.

If you have any questions concerning the research study, please call either myself or Professor Finch at (602) 965-6434.

APPENDIX C

Approval to Conduct Research by Arizona State University

Human Subjects Research Review Committee

Arizona State University

Office of the Vice President for Research
Human Subjects Institutional Review Board (IRB)
Tempe, Arizona 85287-1903
602/965-6788

MEMORANDUM

November 15, 1991

TO: Joyce Finch
College of Nursing

FROM: Carol Jablonski (CJ)
IRB Coordinator

SUBJECT: "Parenting Attitudes of Expectant Couples Associated
with the Air Force" HS #92-051

The Human Subjects Institutional Review Board has concurred your above-referenced project qualifies for exemption from Full Board review under Category #3.

The IRB would like to remind you that Federal regulations require investigators to immediately report to the Board any complaints, incidents, or injuries that may occur as part of the project.

It should be noted that exempt research is approved for one year only. Should this project be expanded in the future, please notify me at the Human Subjects Office (mail code 3403).

kh

xc: Deborah Echanis
Janelle Krueger

APPENDIX D

Approval to Conduct Research by Department of the Air Force



DEPARTMENT OF THE AIR FORCE
HEADQUARTERS AIR FORCE MILITARY PERSONNEL CENTER
RANDOLPH AIR FORCE BASE TX 78150-6001

8 JAN 1992

Capt Deborah L. Echanis
2302 E. Boston Street
Chandler AZ 85225

Dear Capt Echanis

Thank you for submitting your research proposal and instrumentation in accordance with AFR 30-23. After reviewing your proposed design and the Adult-Adolescent Parenting Inventory, your research study is approved for use at Luke and Williams Air Force Bases if you obtain approval from each hospital commander.

With approval from the hospital commanders at both bases and because of the clinical nature of the research, a survey control number will not be assigned. We wish you continued success in your academic pursuits. You may direct questions to me at (512) 652-5680.

CHARLES H. HAMILTON
Chief, Personnel Survey Branch

cc: AFIT/XPX

APPENDIX E

Verbatim Comments

VERBATIM COMMENTS

Get rid of the "never," "always," etc. Make nominal responses for more accurate survey results.

Ex How often should you spank your child

1	2	3	4	5	6	7	8	9
very often				sometimes				never

This survey sounds contradictory. It seems to me that these questions are trying to make you contradict yourself because a lot of them are asking the same thing but in different format.

Some pretty ambiguous questions in there-----Depending on inferences it is possible to respond with any of the possible choices. Children should receive love and acceptance from Parents as well as discipline. Although an integral part of the family structure, should not be the focus of the relationship to the detriment of all involved.

Children needs to be broken down into more of an age grouping.

Punishment should be stated as physical, verbal or reprimandal.

This is very negative paper. I expected more positive questions from this!

Many of the questions are a bit ambiguous & far too definitive. Perhaps phrasing situations would give a more accurate view of parenting views & responses.

This seems to be a rather negative survey. Children are to be loved and cherished. They are children and should not be expected to know things that adults don't even know.

On question 9 the definition of discipline I use is not the same as Corporal Punishment Discipline is doing the right thing because you know it is right.

Young children are not responsible for anything adults are responsible for their children

I feel spanking as a punishment is a last resort if the child can't be reasoned with.

Question very broad and inconclusive.

I believe that spanking and other forms of physical discipline haveing no effect on child behavior is bullshit. This so called child psychology being the only form of discipline is what is wrong with today's youth. I believe that in moderation, spanking with a few minutes of counseling is the best way to instill discipline in a child. I got my butt beat when I had done something wrong and I turned out all right although I agree that my father should have talked to me more. I hope not to make that mistake with my kids. I know the difference between beating in frustrated above and controlled use of the (Board of Education). I..... I have been in contact with too many loud mouthed, backtalking, no respect for athorty irresponsible teenagers, or adult to let any of my kids grow up that way!

#8 *If a child is doing something where he or she can hurt themselves or someone else, sometimes they need to be spanked if they don't stop doing whatever they are doing.*

#25 *Sometimes yes, but not all the time.*

BIOGRAPHICAL SKETCH

Deborah L. Echanis was born on December 19, 1955 in Albany, New York. She graduated from Guilderland High School in 1974. She served six years in the Navy as a Navy Corpsman. She then attended Russell Sage College, Troy, New York, and graduated a Kellas Scholar with a Bachelor of Science degree in Nursing. She has been an Air Force nurse for the past seven years. She received an Air Force scholarship to return to graduate school. She is a member of Sigma Theta Tau. Her family includes her husband, Larry, and two sons, David and Nicholas.